

*Hepatitis*

On *Sapied March 14<sup>th</sup> 1827*  
*Esay* *W. E. H.*

*Hepatitis*

*Mordica Lawrence Junr*

*of*  
*Pennsylvania.*

*December 2<sup>nd</sup> 1826.*

Oct. 1871.

Sept. 1871.  
A. I. H.

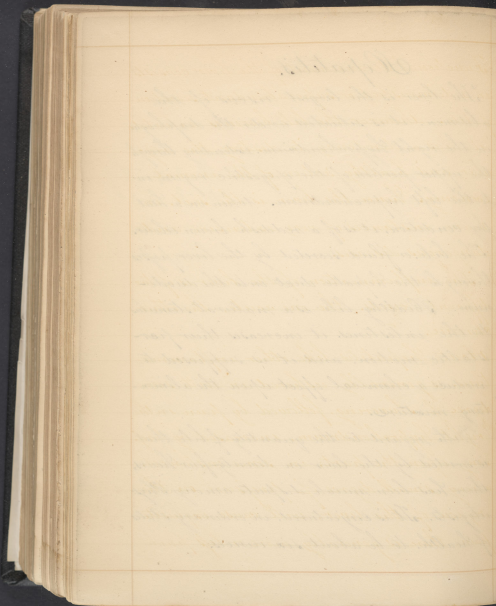
October 1871.

December 1871.

## Hepatitis.

The liver is the largest viscus of the abdomen. it is situated under the diaphragm in the right Hypochondrium, extending through the upper portion of the epigastric region into the left Hypochondrium. When in a healthy condition, it is of a reddish brown colour. The bile, or fluid secreted by the liver, passes through the hepatic duct into the duodenum. Healthy bile is a natural stimulus to the intestines, it increases their peristaltic motion, and it is supposed to produce a chemical effect upon the alimentary mixture.

With regard to the quantity of bile that is secreted by the liver in twenty-four hours, there has been much dispute among Physiologists. It is conjectured, in ordinary states of health, to be about six ounces.

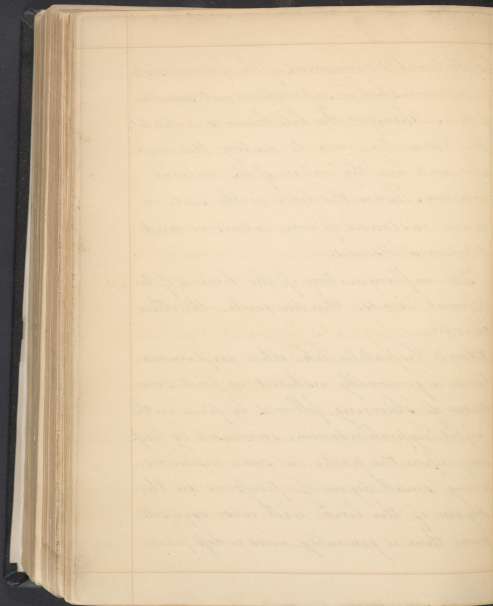




Functional derangement of the liver consists in a diminished or superabundant secretion of bile. Whenever the bile becomes vitiated, it has a tendency to destroy the regular and healthy action of the animal economy. Hence the liver is the seat, in many instances of very extensive and dangerous diseases.

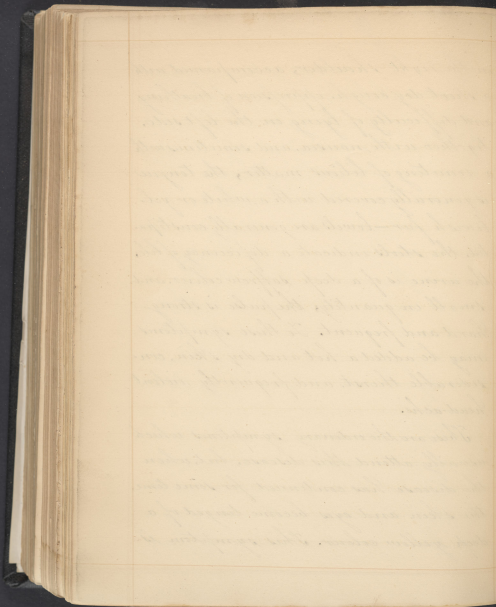
The inflammation of the liver is of two different kinds, the one acute, the other chronic.

Acute Hepatitis like other inflammations, is generally ushered in with some degree of shivering, followed by pain in the right Hypochondrium, increased by pressing upon the part; in some instances, a very small degree of pressure on the region of the liver, will cause exquisite pain: there is generally more or less pain



in the right shoulder, accompanied with a short dry cough, oppression of breathing and difficulty of lying on the left side, together with nausea, and sometimes with a vomiting of bilious matter, the tongue is generally covered with a white or yellowish fur—bowels are generally constipated, the stools indicate a deficiency of bile, the urine is of a deep saffron colour, and small in quantity, the pulse is strong, hard and frequent. To these symptoms may be added a hot and dry skin, considerable thirst, and frequently violent head-ache.

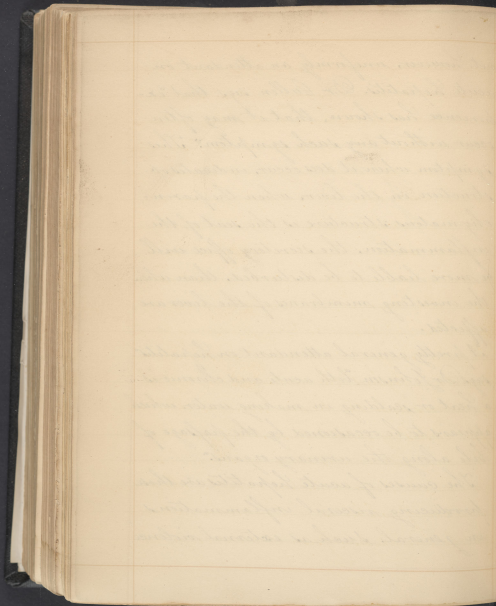
These are the ordinary symptoms which usually attend this disease: but, when the disease has continued for some time, the skin and eyes become tinged of a deep yellow colour. This symptom is



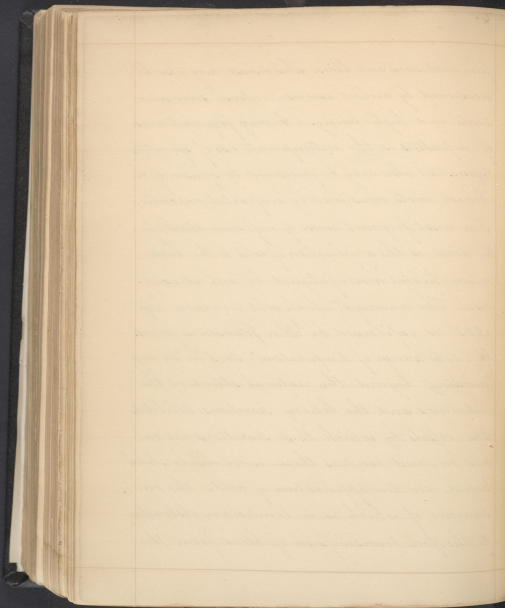
not. However, uniformly, an attendant on acute Hepatitis. Dr Cullen says, that experience has shown, that it may often occur without any such symptom. This symptom when it does occur, indicates obstruction in the liver, when the parenchymatous structure is the seat of the inflammation, the secretory office will be more liable to be disturbed, than when the investing membranes of the liver are affected.

A pretty general attendant on Hepatitis says Dr Johnson both acute and chronic is a heat or scalding in making water, which appears to be occasioned by the passage of bile along the urinary organs.

The causes of acute Hepatitis are those producing visceral inflammations in general. Such as external violence



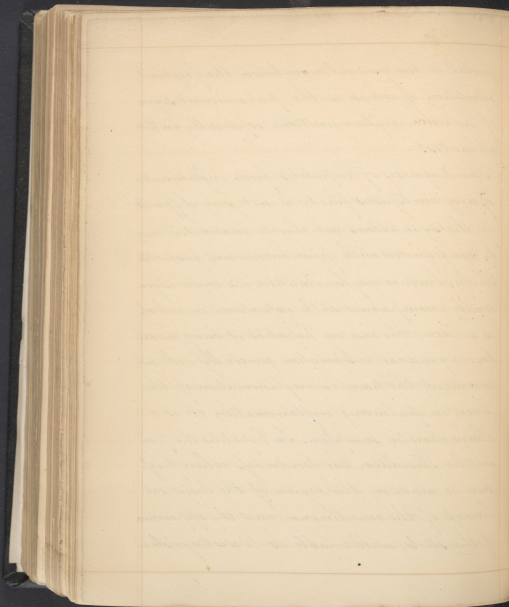
from contusions and blows. This disease may also be occasioned by violent exercise, intense summer heats, and high living. A very frequent cause of hepatitis is the intemperate use of spiritous liquors. It also may be produced by spasm of the biliary ducts, occasioned by impacted calculi. The most frequent cause of inflammation of the liver, is the application of cold to the body when heated or over fatigued by violent exercise. The manner, <sup>in</sup> which cold produces hepatitis is explained by Dr. Johnson as follows. "A high range of temperature" says he "by augmenting beyond the natural standard the cutaneous and the biliary secretions, debilitates the vessels by which these secretions are carried on, and renders them more easily struck torpid, on the application of cold, the consequence of which is, a temporary obstruction to the free transmission of blood from the





portal to the general circulation the frequent repetition of which is the paramount source of hepatic inflammation. especially in hot climates."

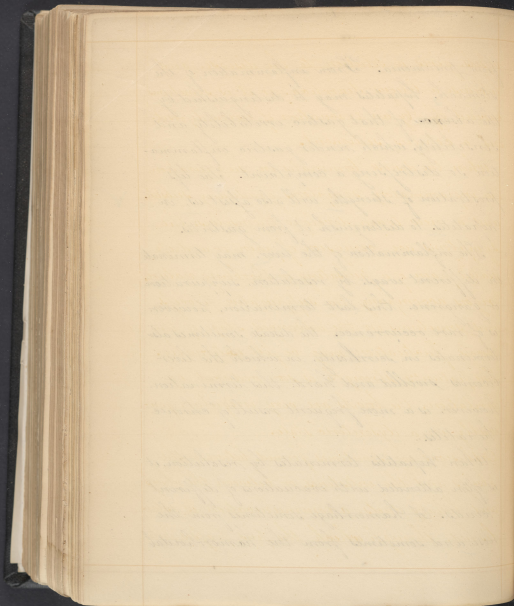
The diagnosis of Hepatitis from inflammation of any contiguous part. is not very difficult if the symptoms are clearly marked. It may be confounded with pneumonia and gastritis. In pulmonic inflammation the cough is generally accompanied with expectoration which is seldom the case in Hepatitis. it being mostly dry. a gradual inspiration generally will not augment the pain in inflammation of the liver. in pulmonic inflammation it is a characteristic symptom. In Hepatitis the pain in the shoulder. the tenderness when pressure is made on the region of the liver. salowness of the countenance. and the appearance of the stools. will enable us to distinguish it



from pneumonia. From inflammation of the stomach, hepatitis may be distinguished by the absence of that gastric irritability and sensibility, which render gastric inflammation so distressing a complaint. The less prostration of strength, will also assist us, in hepatitis, to distinguish it from gastritis.

The inflammation of the liver, may terminate in different ways: by resolution, suppuration or gangrene. this last termination, however, is of rare occurrence, the disease sometimes also terminates in scirrhusity, in which the liver becomes swelled and hard, this termination, however, is a more frequent result of chronic hepatitis.

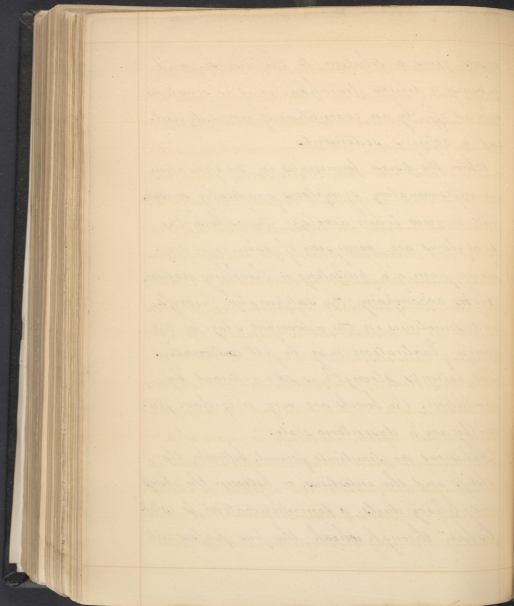
When hepatitis terminates by resolution, it is often attended with evacuations of different kinds. A hæmorrhage sometimes from the nose, and sometimes from the hæmorrhoidal



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vessels, gives a solution to the disease, and likewise a bilious diarrhoea, or it is sometimes carried off by an evacuation of urine, depositing a copious sediment.

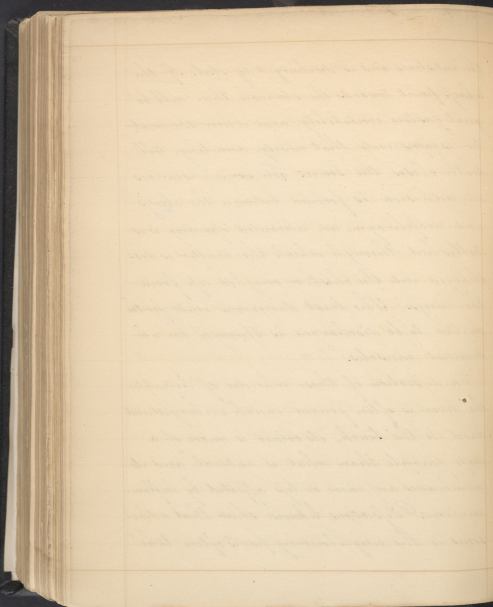
When the disease terminates in suppuration, the inflammatory symptoms gradually subside, and a new train develops themselves; the symptoms are, remission of pain, or a deep seated pain of a pulsating or throbbing nature, rigors accompanying the suppurative process, and sometimes in the advanced stage of the abscess, fluctuation may be felt externally. The patient's strength is soon reduced by irritation, the bowels are very irregular, generally in a dysenteric state.

Adhesions are sometimes formed, between the abscess and the intestines, or between the abscess and biliary ducts, a communication is established, through which the pus passes into



the intestines and is discharged by stool. If the abscess point towards the stomach, there will be great gastric irritability, and when the matter escapes into that cavity, vomiting, till death closes the scene: In some instances an adhesion is formed between the abscess and diaphragm, an ulcerated opening is established, through which the matter is discharged into the chest, or coughed up from the lungs. The least dangerous route for the matter to be discharged is through the abdominal muscles.

In dissection of those who die of Hepatitis the liver is often found much enlarged and hard to the touch, its colour is more of a deep purple than what is natural, and its membranes are more or less affected by inflammation. Dissections likewise show that adhesions to the neighbouring parts often take

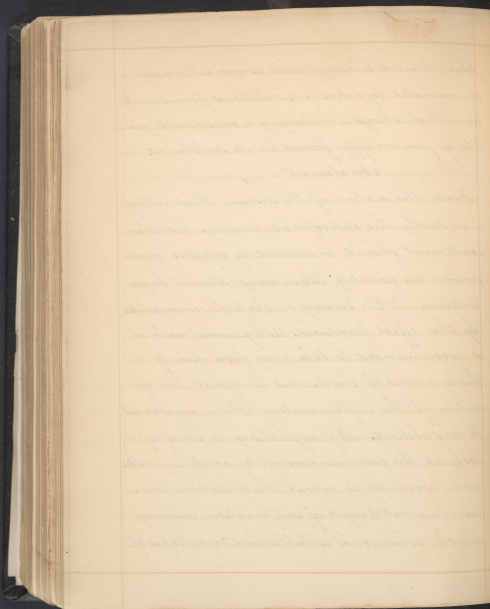




place. that tubercles, as well as vesicular cysts denominated hydatids, are sometimes found in it, and that abscesses, containing a considerable quantity of pus, are often formed in its substance.

#### Treatment.

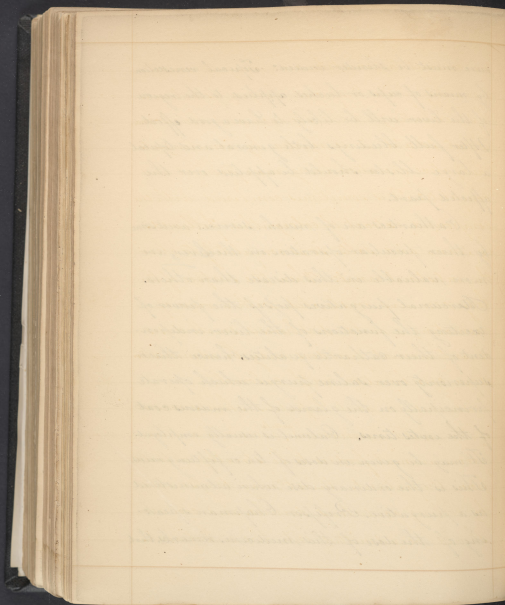
From the nature of the disease, blood letting is evidently the appropriate remedy. vascular excitement should be reduced by copious venesection: the quantity taken away, should be proportioned, to the severity of the pain, or regulated by the effect produced. as a general rule it is recommended to take away from twenty to thirty ounces of blood, and to repeat the operation if the inflammatory action appear not to be subdued. By neglecting to bleed copiously at the commencement of acute hepatitis and promptly to repeat the operation, there will be great danger of suppuration ensuing, which, when once established, our hopes of



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cure must be slender indeed: Topical venesection  
by means of cups or leeches, applied to the region  
of the liver will be likely to have a good effect.  
After full bleedings both general and topical  
a large blister should be applied over the  
affected part.

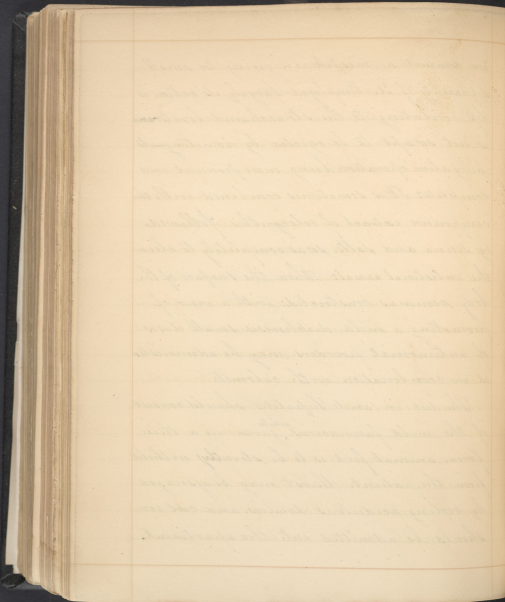
Cathartics are of much service: and some  
by their peculiar operation on the Liver, are  
more valuable in this disease than others.

Mercurial purgatives possess the power of  
exciting the functions of the liver independ-  
ent of their cathartic qualities: hence their  
superiority over saline purges, which operate  
principally on the glands of the mucous coat  
of the intestines. Calomel is usually employed.  
It may be given in doses of ten or fifteen grains.  
This is the ordinary dose when administered  
as a purgative. Professor Chapman speak-  
ing of the dose of this medicine, remarks, that



we commit a mistake in giving too small a quantity of it. Employed largely, its action is less irritating to the stomach and bowels - and is not so apt to be rejected by vomiting - its purgative operation being more prompt and complete. It is sometimes combined with the compound extract of colocynthis, followed by ienna and salts, so as completely to clear the intestinal canal. When the surface of the body remains constricted, with a view of promoting a mild diaphoresis, small doses of antimonial powders may be administered in combination with calomel.

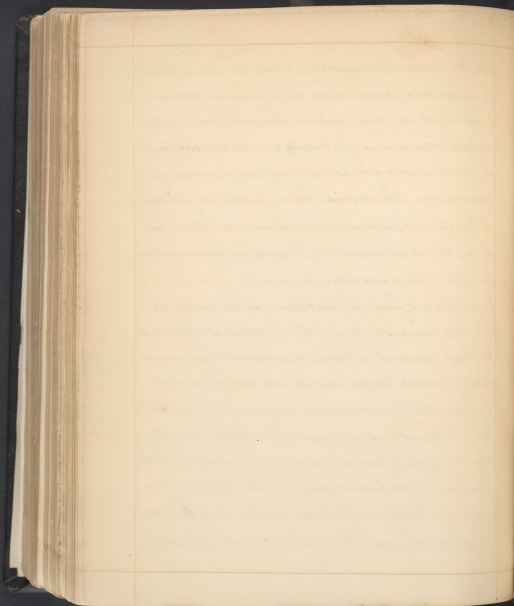
The diet in acute hepatitis should consist of the mild farinaceous <sup>articles</sup>, given in a thin form; animal food is to be strictly withheld from the patient. Thirst may be assuaged by cooling acidulous drinks, and cool air should be admitted into the apartment.



At the commencement of this disease. the antiphlogistic plan is to be pursued. when, by this mode of treatment the inflammatory symptoms are sufficiently reduced. mercury is generally resorted to, for the purpose of removing the disease by a gentle ptyalism.

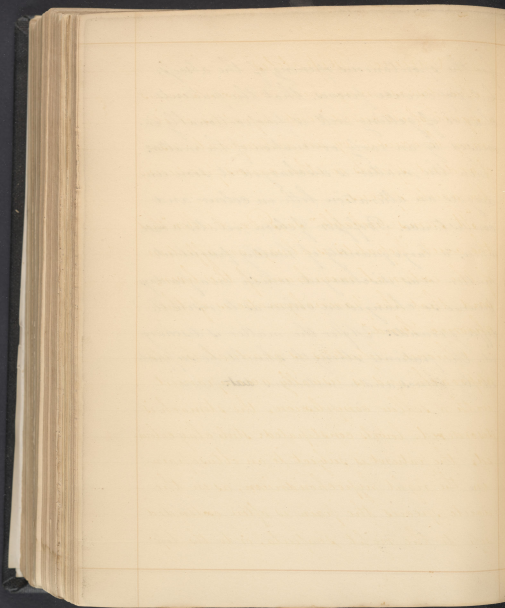
Professor Chapman recommends, that, to be effectual it ought to be gradually insinuated into the system.

Then we fail to procure resolution of this disease and suppuration becomes established, which is not a very uncommon termination of acute Hepatitis in warm climates, where the disease is of frequent occurrence, we should, as soon as the abscess points externally, open it, and not leave it to be opened spontaneously by the efforts of nature. Professor Gibson states, that Surgeons were much in the habit formerly of waiting





for the spontaneous opening of the abscess: but experience proves, that the patients chance of getting well is proportionably increased by an early evacuation of the matter: When the matter is discharged it soon undergoes an alteration both in colour and consistence. Professor Gibson relates a case, where, "a large quantity of healthy purulent matter was discharged, which in a few days became so changed in colour as to resemble coffee grounds." After the matter is discharged, the patients strength should be supported by tonics, and a nutritious diet.



## Chronic Hepatitis

This disease may have an existence as a sequel of ill cured acute hepatitis, or it may be caused by an intemperate use of ardent spirits or other causes producing the acute species.

"It seems probable" says Dr. Cullen that the acute Hepatitis is always an affection of the external membrane of the liver, and that the parenchymatic is of the chronic kind."

Chronic Hepatitis is gradual in its approach, and is usually accompanied with a sallow complexion; the stomach is disordered; bowels constipated; stools clay coloured; the patient is subject to an obtuse pain in the right hypochondrium, as in the acute species the pain is often extended up to the right scapula, or to the top

THE HISTORY OF THE

REIGN OF KING CHARLES THE FIRST

BY JOHN BURNET

OF THE UNIVERSITY OF OXFORD

IN TWO VOLUMES

LONDON

Printed by J. Streater, at the

Sign of the Sun, in St. Dunstons Church-yard

1680.

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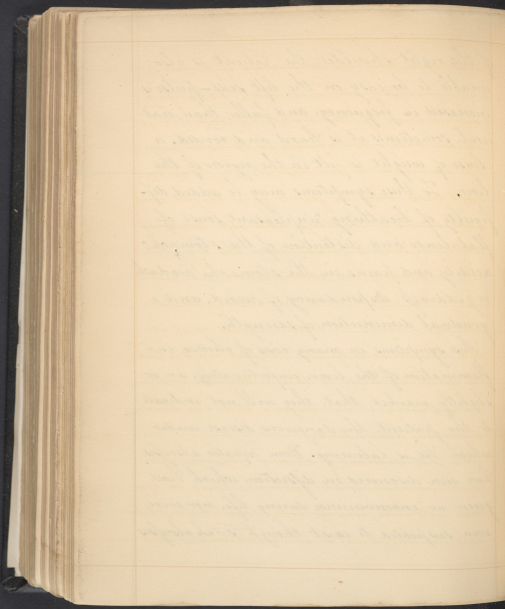
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1680.

of the right shoulder. the patient is also unable to lie easy on the left side—pulse is increased in frequency, and fuller than natural, sometimes it is hard and corded, a sense of weight is felt in the region of the liver. To these symptoms may be added difficulty of breathing, "unpleasant sense of flatulence and distention of the stomach; acidity and pains in the stomach. Headache or giddiness, dispondency of mind, and a gradual diminution of strength.

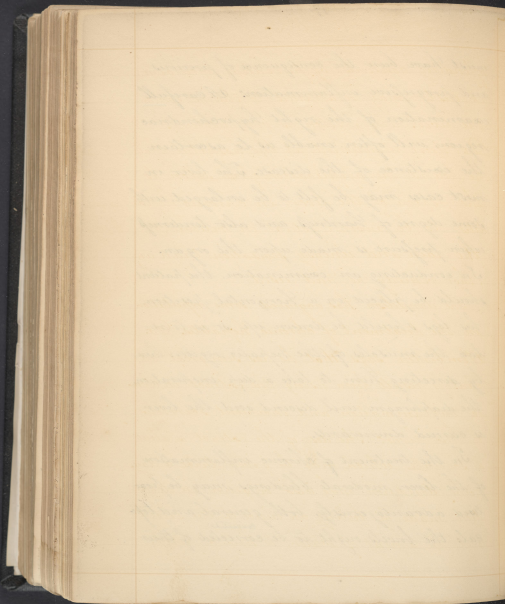
These symptoms in many cases of chronic inflammation of the liver, unfortunately, are so slightly marked, that they will not indicate to the patient, the dangerous disease under which he is labouring. Even Hepatic abscesses have been discovered on dissection, which had given no inconvenience during life, nor were even suspected to exist though such abscesses



must have been the consequence of previous and progressive inflammation. A carefull examination of the right Hypochondriac region, will often enable us to ascertain the existence of the disease. The liver in most cases may be felt to be enlarged, with some degree of hardness, and also tenderness when pressure is made upon the organ.

In conducting an examination, the patient should be placed in a Horizontal position. His legs should be drawn up, so as to relax the muscles of the Hepatic region; then, by directing him to take a deep inspiration, the diaphragm will descend and the liver is carried downwards.

In the treatment of chronic inflammation of the liver, moderate bleedings may be practised advantageously, both general and topical: the bowels ought to be corrected of their



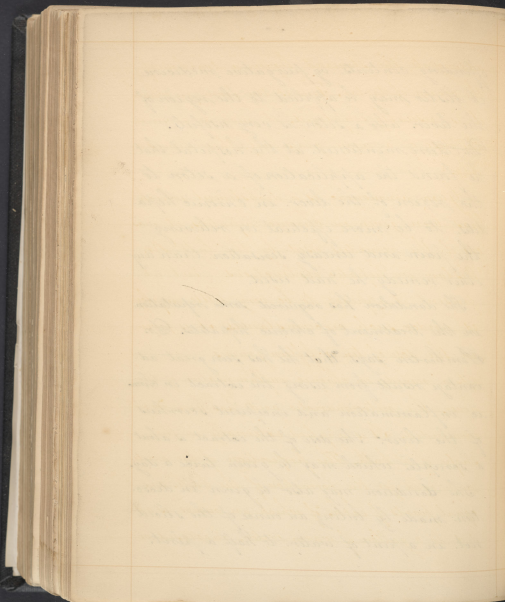


offending contents by purgative medicine. A blister may be applied to the region of the liver, also a seton is very useful.

Dr. Moore mentioned, at the hospital, that he found the application of a seton to the region of the liver, in chronic hepatitis, to be more effectual in relieving the pain and uneasy sensation, than any other remedy he had used.

The dandelion has acquired some reputation in the treatment of chronic hepatitis. Dr. Pemberton says, that he has seen great advantage result from using the extract in chronic inflammation and incipient scirrhus of the liver. The dose of the extract is about a scruple, which may be given twice a day.

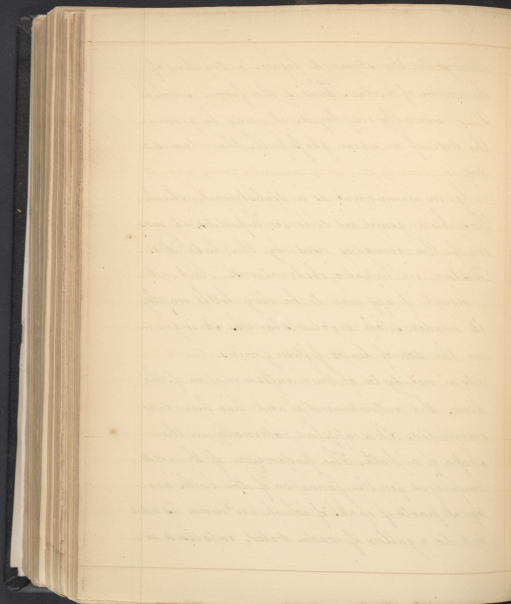
The dandelion may also be given in decoction, made by boiling an ounce of the sliced root, in a pint of water, to half a pint.



adding to the strained liquor, a drachm of the cream of tartar. This is the form in which it is usually employed, it may be given in the dose of a wine glass-full, three times a day.

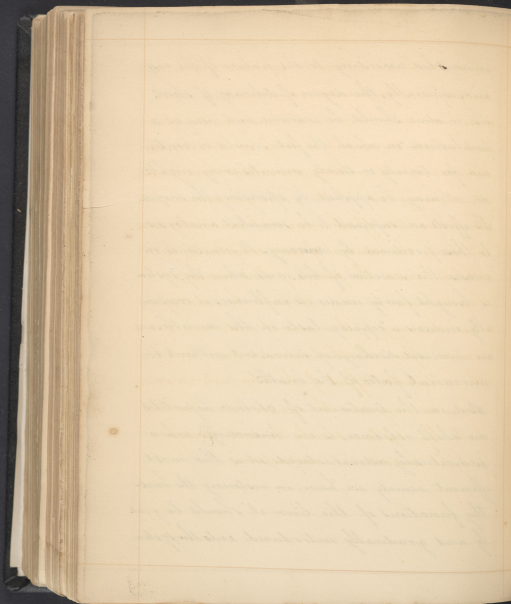
Gum ammoniac is a deobstruent, which has been given in chronic hepatitis, it was one of the remedies used by the late Dr. Wistar in hepatic obstructions. but at present it appears to be very little employed under such circumstances. It is given in the dose of ten or fifteen grains.

As a remedy in chronic inflammation of the liver, the nitromuratic acid has been recommended. It is applied externally in the shape of a bath. The proportion of the acids, employed for the formation of the bath, are equal parts of each, of which an ounce is added to a gallon of warm water, increased or



diminished according to the nature of the case, and especially, the degree of delicacy of skin. The mixture should be warmed, and used as a pediluvium in which the feet should be continued for twenty or thirty minutes every night: or it may be applied by sponging the surface. Its effects are supposed to be somewhat analogous to those produced by mercury. It sometimes increases the secretion of bile, and when the system is brought fairly under its influence, it occasionally induces a coppery taste in the mouth, and an increased discharge of saliva, but without the mercurial odor of the breath.

But in the treatment of chronic hepatitis our chief reliance is on mercury, when judiciously administered, it is the most efficient remedy we have, in restoring the healthy functions of the liver it should be gently and gradually introduced into the system.



till a slight salivation is effected. The relief, indeed, (says Dr. Johnson) experienced in, most cases of chronic Hepatitis, the moment that mercury affects the mouth is truly surprising. The removal of all uneasy sensations from the side, the clearing up of the skin and countenance, the restoration of the natural evacuations, and, in short, the removal of every complaint but debility, vince the powers of this remedy.

In some cases, it may, perhaps, be unnecessary to use mercury with a view of inducing salivation, after all other remedies have failed.

An alterative Effect of the blue pill, in some instances, may cure the disease, but when this fails, the system should be put under a slight mercurial impression.

